

Please type a pl	flus sign (+) inside this box → +			Pat	Appro	oved for u	use thro	PTO/SB/05 (4/98) ugh 09/30/2000. OMB 0651-0032 5. DEPARTMENT OF COMMERCI	
Under the Paper	work Reduction Act of 1995, no persons a			nd to a collec	tion of informa	ation unle	ss it dis	splays a valid OMB control number	
	UTILITY		_	ey Docket I			SC.	H01.NP001	
PAT	TENT APPLICATION	L	First II	nventor or A	pplication lo	dentifier		SCHNEIDER, Jay S.	
'^'	TRANSMITTAL		Title	TREATMENT (OF PARKINSON	S DISEASE	WITH C	DLIGONUCLEOTIDES	
(Only for new r	nonprovisional applications under 37 C.F.R	R. § 1.53(b))	Ехрге.	ss Mail Lab	el No.		EE 4	68 270 877 US	
•	APPLICATION ELEMENTS hapter 600 concerning utility patent applicat	tion contents.		ADE	RESS TO	: Box P	atent /	ommissioner for Patents Application DC 20231	
. ∇ F	ee Transmittal Form (e.g., PTO/SB			5.	Microfiche			gram (Appendix)	
1. [A] (Si	ubmit an original and a duplicate for fee pr		_		ı	•			
(pr	(preferred arrangement set forth below)			6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy					
	Descriptive title of the Invention Cross References to Related Applicat	ione							
	Statement Regarding Fed sponsored			b.	Par	per Copy	y (iden	tical to computer copy)	
	Reference to Microfiche Appendix			C.	Sta	tement	verifyir	ng identity of above copies	
- B	- Background of the Invention				ACCOMPA	NYING	APF	LICATION PARTS	
	Brief Summary of the Invention	(t)		7. X	Assignmer	nt Paper	s (cove	er sheet & document(s))	
	Brief Description of the Drawings (<i>if fil</i> Detailed Description	lea)		8.	37 C.F.R.§3.73(b) Statement Power of				
- 0	Claim(s)			9.				ment (if applicable)	
	Abstract of the Disclosure		7	Information Disclosure Copies of IDS					
3. X Dr.	rawing(s) (35 U.S.C. 113) [Total She	<u> </u>	<u> </u>]}	10.	Statement	(IDS)/P	TO-14		
4. Oath or I	Declaration [Total Pa	iges 2]]	11.	Preliminary				
а.	a. X Newly executed (original or copy)			12. X				(MPEP 503) emized)	
Ь. Г	b. Copy from a prior application (37 C.F.R. § 1.6 (for continuation/divisional with Box 16 completed)			(Should be specifically itemized) * Small Entity Statement filed in prior application.					
_	DELETION OF INVENTOR		u)	13. X Statement(s) Statement filed in prior application (PTO/SB/09-12) Status still proper and desired					
	Signed statement attac	ched deletin		Certified Copy of Priority Document(s)					
inventor(s) named in the prior applicat see 37 C.F.R. §§ 1.63(d)(2) and 1.33((if foreign priority is claimed)					
NOTE FOR	ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO	PAY SMALL	ENTITY	15.	Other: .	CCITII	Cate O	LApress Haming	
FEES. A SMA	ALL ENTITY STATEMENT IS REQUIRED (37 C.I D IN A PRIOR APPLICATION IS RELIED UPON	F.R. § 1.27), EX	CEPT] [••••••		
16. If a CO	ONTINUING APPLICATION, check app						and in	a preliminary amendment:	
Continuation Divisional Continuation-in-part (CIP) of prior application No:/									
Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied									
under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
17. CORRESPONDENCE ADDRESS									
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Or Correspondence address below									
	Clifford Kent Weber, Esq.	•••••							
Name	Chilora Rent Webel, Esq.	•							
	Thomas Jefferson Univers	ity - Off	ice o	f Univer	sity Com	nsel			
Address	Thomas Jefferson University - Office of University Counsel 1020 Walnut Street - Suite 620								
City	Philadelphia	Sta	, Ti	PA		Zip C	ode	19107-5587	
City Country	Philadelphia	Telephone		(215) 50	3-0757		Fax	(215) 923-3613	

Clifford Kent Weber Registration No. (Attorney/Agent) 42,215 Name (Print/Type)

Signature

Date

Date

July

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (12-98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 1999

Patent fees are subject to annual revision.

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT

(\$) 331.00

Complet if Known						
Application Number	Not Known					
Filing Date	November 5, 1999					
First Named Inventor	SCHNEIDER, Jay S.					
Examiner Name						
Group / Art Unit						
Attorney Docket No.	SCH01.NP001					

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit		ntity Sr Fee Fe	NAL FE	ES	Fee Paid	
Account Sumber 50-0491	105 13	30 20	5 65	Surcharge - late filing fee or oath		
Deposit Account Name Thomas Jefferson University	127	50 22	7 25	Surcharge - late provisional filing fee or cover sheet.		
Charge Any Additional	139 13	30 13	9 130	Non-English specification		
Fee Required Under 37 CFR 1.16 and 1.17	147 2,5	520 14	7 2,520	For filing a request for reexamination		
2 Payment Enclosed:	. 112 92	20* 1°	12 920*	Requesting publication of SIR prior to Examiner action		
2. Payment Enclosed: Check Money Other	113 1,8	340* 1	1,840*	Requesting publication of SIR after Examiner action		
	115 11	10 21	5 55	Extension for reply within first month		
FEE CALCULATION	116 38	80 21	6 190	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	117 87	70 21	7 435	Extension for reply within third month		
Fee Fee Fee Fee Description	118 1,3	60 21	680	Extension for reply within fourth month		
Code (\$) Code (\$) Fee Paid 101 760 201 380 Utility filing fee 380	128 1,8	50 22	925	Extension for reply within fifth month		
106 310 206 155 Design filing fee	119 30	00 21	150	Notice of Appeal		
107 480 207 240 Plant filing fee	120 30	00 22	150	Filing a brief in support of an appeal		
108 760 208 380 Reissue filing fee	121 26	60 22 ⁻	130	Request for oral hearing		
114 150 214 75 Provisional filing fee	138 1,5	10 138	3 1,510	Petition to institute a public use proceeding		
	140 11	10 240	55	Petition to revive - unavoidable	i	
SUBTOTAL (1) (\$) 380	141 1,2	10 241	605	Petition to revive - unintentional		
2. EXTRA CLAIM FEES	142 1,2	10 242	605	Utility issue fee (or reissue)		
Fee from Extra Claims below Fee Paid	143 43	30 243	215	Design issue fee		
Total Claims 22 -20** = 2 x 9 = 18	144 58	30 244	290	Plant issue fee	<u> </u>	
Independent 10 - 3** = 7 x 39 = 273	122 13	30 122	130	Petitions to the Commissioner		
Multiple Dependent	123 5	50 123	50	Petitions related to provisional applications		
**or number previously paid, if greater; For Reissues, see below	126 24	10 126	240	Submission of Information Disclosure Stmt		
Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	581 4	10 581	40	Recording each patent assignment per property (times number of properties)	40	
103 18 203 9 Claims in excess of 20	146 76	0 246		Filing a submission after final rejection		
102 78 202 39 Independent claims in excess of 3	149 76	SO 249		(37 ČFR 1.129(a))		
104 260 204 130 Multiple dependent claim, if not paid	140 70	240		For each additional invention to be examined (37 CFR 1.129(b))		
109 78 209 39 ** Reissue independent claims over original patent	Other fee ((specify)			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent						
SUBTOTAL (2) (\$) 291	Reduced	by Bas	c Filing F	ee Paid SUBTOTAL (3) (\$)	40	

SUBMITTED BY	<u> </u>	Complete (if	applicable)
Typed or Printed Name	Clifford Kent Weber	Reg. Number	42,215
Signature	Willer Heat Weller Date 11/5/99	Deposit Account User ID	50-0491

Burden Hour Statement: This form's estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENTAND TRADEMARK OFFICE

ATTORNEY DOCKET NO.:

SCH01.NP001

TITLE:

TREATMENT OF PARKINSON'S DISEASE

WITH OLIGONUCLEOTIDES

INVENTOR:

SCHNEIDER, Jay S.

"Express Mail" Label No. EE 468 270 877 US Date of Deposit - November 5, 1999

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Box Patent Application, Washington, D.C. 20231.

Ву

Typed Name: CLIFFORD KENT WEBER

Clifford Kest Weber

Box Patent Application Commissioner of Patents & Trademarks Washington, DC 20231 PTO/SB/11 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(d))NONPROFIT ORGANIZATION	Docket Number (Optional) SCH01.NP001				
Applicant, Patentee, or Identifier: SCHNEIDER, Jay S. Application or Patent No.: Not known Filed or Issued: November 5, 1999 Title: TREATMENT OF PARKINSON'S DISEASE WITH OLIGONUCLEOT	IDES				
I hereby state that I am an official empowered to act on behalf of the nonprofit organization idea NAME OF NONPROFIT ORGANIZATION Thomas Jefferson University ADDRESS OF NONPROFIT ORGANIZATION 11th and Walnut Streets Philadelphia, PA 19107					
TYPE OF NONPROFIT ORGANIZATION: MULLING UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION					
TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501	(c)(3))				
☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNI (NAME OF STATE (CITATION OF STATUTE)					
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 UP 15 LOCATED IN THE UNITED STATES OF AMERICA	J.S.C. 501(a) and 501(c)(3))				
□ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA (NAME OF STATE (CITATION OF STATUTE)					
I hereby state that the nonprofit organization identified above qualifies as a nonprofit organ 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarin:	zation as defined in 37 CFR ding the invention described				
 					
I hereby state that rights under contract or law have been conveyed to and remain with regarding the above identified invention. If the rights held by the nonprofit organization are no concern, or organization having rights in the invention must file separate statements as to their that no rights to the invention are held by any person, other than the inventor, who would not qualify under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).	t exclusive, each individual, status as small entities and as an independent inventor				
Each person, concern, or organization having any rights in the invention is listed below:					
☑ no such person, concern, or organization exists. ☐ each such person, concern, or organization is listed below.					
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))					
NAME OF PERSON SIGNING Alan B. Kelly, Esq.					
TITLE IN ORGANIZATION OF PERSON SIGNING University Counsel					
ADDRESS OF PERSON SIGNING Thomas Inferson University, 1020 Walnut Street, Philadelphia, PA 19107					
SIGNATURE DATE 11/5/99					
<i>'</i>					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.